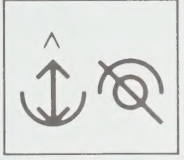


COMMUNICATING TOGETHER



A QUARTERLY MAGAZINE ABOUT AUGMENTATIVE AND ALTERNATIVE COMMUNICATION

VOLUME 8, NUMBER 3

SEPTEMBER 1990



CONTENTS

3 ISAAC IN SWEDEN — SOMETHING FOR EVERYONE

ANN KENNEDY

FAMILY AND COMMUNITY

5 I'm in a Field Trial Now

KARI HARRINGTON

PERSPECTIVE

6 The Delaware Visions Conference: Growing with the Field of Augmentative Communication

MICK JOYCE

RESEARCH AND PUBLICATIONS

8 RESNA, Research and Ruminations about the "TH" Words

GEB VERBURG

MACHINES, COMPUTERS AND THINGS

10 Bliss Survey of Speech Impaired Canadians

DEBORAH FINN

BLISSYMBOL TALK

12 New Blissymbols for Teaching Human Sexuality

CLAUDIA WOOD

14 THE PARAPHRASE

DONNA MCGHIE-RICHMOND

RESEARCH INTO PRACTICE

15 Learning to ask Questions

BARBARA REID

AUGMENTATIVE COMMUNICATION

17 Collaborative Consultation: A Model Service Delivery Part 2

NAOMI GIBSON

19 COMMUNICATING IN ONTARIO

SHERRI PARKINS

READERS WRITE

21 Encountering Death from a Disabled Perspective

SUSAN ODELL

23 SCHEDULE OF EVENTS



VOL. 8, NO. 3 SEPTEMBER 1990

Established November 1982

Published quarterly by the Easter Seal Communication Institute, a division of The Easter Seal Society.

Director: Ann Kennedy

Editorial Team: Ann Kennedy,

Naomi Gibson, Barbara Reid,

Nancy McCartney, Sherri Parkins

Subscriptions: Darlene Blachar

Design: Jack Steiner

Typesetting and Printing:

The Beacon Herald, Stratford, Ontario

Cover: Barbara Collier, Canada, and Sudha Kaul, India, received the President's Award from Penny Parnes, ISAAC president, for their work as co-chairs of the Developing Countries committee, at the Fourth Biennial International ISAAC Conference, Stockholm, Sweden, August 16, 1990.

The contents are copyright.

Second Class Mail Registration No. 7093

Communicating Together is published quarterly as a means of sharing the experiences and communication systems of nonspeaking people with their families, communities and the professionals who work with them.

The cover design reflects, directly and indirectly, the many techniques that contribute to augmentative communication: pictures, drawings, signing, Blissymbols, words and technology.

Back Issues: Limited number available, \$5. Canadian funds.

Subscription Rate: \$22. per year Canadian funds, \$19. per year U.S. funds. Subscriptions outside North America \$27. per year Canadian funds. ISAAC Members \$5. discount on each of the above rates.

Direct correspondence regarding subscriptions, back issues, contributions, sponsoring, advertising, address changes and bulk mailings to:

Communicating Together

Easter Seal Communication Institute

250 Ferrand Drive, Suite 200

Don Mills, Ontario, Canada M3C 3P2

Communicating Together is an affiliated publication of the International Society for Augmentative and Alternative Communication (ISAAC).

The Publisher

The Easter Seal Communication Institute (ESCI) wishes to recognize and thank the Pilot Club International, Ontario District, for its support in sponsoring sections of *Communicating Together*.

ESCI gratefully acknowledges funding by the Kiwanis Club of Toronto to support the typesetting font development. Blissymbols presented herein have been electronically typeset.

ESCI is a member of the Canadian Magazine Publishers Association (CMPA).

Ontario Society for Crippled Children, income tax donation registration No. 0003285-11.



ISAAC IN SWEDEN — SOMETHING FOR EVERYONE

ANN KENNEDY

Ann Kennedy is editor of Communicating Together and director of the Easter Seal Communication Institute in Toronto Canada.

I am still recovering from jet lag and exhaustion as I sit down to write about the Fourth Biennial ISAAC Conference held last week in Stockholm, Sweden. But at the same time I am refreshed by the stimulation of new ideas and the warmth of friends — new and old — with whom I visited.

The Swedish committee, under the direction of Cecilia Olsson, left nothing to chance as they planned the program. There were over 250 presentations including traditional platforms, round table discussions, poster sessions, videos, and computer demonstrations. There was something for everyone; in fact, usually the problem was choosing amongst two or three promising presentations that were scheduled at the same time! Lack of space prevents me from describing in detail any of the sessions I found particularly exciting, but I hope some of them can be discussed in depth in future issues of *Communicating Together*.

Highlights of the General Sessions.

The Opening Session of the conference began with over five hundred delegates being serenaded by a Swedish group, Häggarna. This is a group of talented developmentally disabled young men and women, directed by Carol Mognaschi, who have earned a reputation throughout Scandinavia and Europe. They had us all toe-tapping to their infectious rhythms and songs. The opening session was chaired by Gunnar Fagerberg, past president of ISAAC, who introduced the keynote speaker, Professor Björn Lindblom of the University of Texas, speaking on "Milestones in the Development and Evolution of Speech".

A member's meeting was held on

Tuesday, chaired by President Penny Parnes. She reported that over the last two years, the chapter concept has grown and there are now seven ISAAC chapters representing members in the United Kingdom, the United States, Israel, Finland, Sweden, the Netherlands and Germany. There are now over 2000 ISAAC members from more than twenty-five countries.

The names of the newly elected board members were announced, and the new members of the executive committee were introduced. Incoming president is Arlene Kraat from the United States, with Margita Ludman of Sweden as president-elect.

Over the past two years, much attention has been given by the ISAAC executive to developing countries. Contacts have been made in forty-two countries with people interested in establishing an awareness of augmentative and alternative communication (AAC). I hope in a later issue of this magazine to bring you a more complete report of the exciting work being done by the Developing Countries Committee.

The closing session on Thursday afternoon was devoted to presentation of awards and the Phonic Ear AAC Distinguished Lecture. A full list of awards will be published in the ISAAC bulletin, but a few are worthy of special mention here. At each conference, Prentke Romich Company (PRC) gives three awards for articles that have appeared in the AAC journal over the preceding two years. Sue Thurston from Canada was the only author present to receive one of the student awards for an article she and Alison Kelford Smith wrote on "The form and use of written communication produced by physically disabled individuals using microcomputers".

Penny Parnes presented the President's award to Barbara Collier from Canada and Sudha Kaul of India, co-chairs of the Developing Countries Committee. As mentioned earlier, this has been a major thrust of ISAAC in the last two years, and

these two women have worked diligently over the time in increasing awareness of ACC in emerging areas of the world and in finding ways to provide support and training to these countries. They also were the chairpersons of the very successful seminar on developing countries that preceded the ISAAC meeting.

Two New Awards

This year a new award was given in honour of Shirley McNaughton and the major contribution she has made to the formation of ISAAC and the development of the field of AAC. This award is given for exemplary communication within or across disciplines, languages or programs; writing, presentations or workshops; research, study or individual example. Shirley very proudly presented this first award to Leo Leppälä, a Blissymbol user from the Swedish speaking part of Finland. Leo is an accomplished poet; his works have been published in many newspapers and books in Finland. One of his poems was set to music and sung to the audience by his attendant. It was a moving experience for us all. Leo is truly an example of exemplary communication and a worthy recipient of this first award!



Sarah Blackstone receiving the Distinguished Service award from Penny Parnes.



Leo Leppälä chats with Shirley McNaughton.

The second new award presented this year was the Distinguished Service Award. Nominations are made by ISAAC members, to recognize someone who has given long, consistent and distinguished service to the field of AAC. This year's winner was Sarah Blackstone of the United States. She has been involved in AAC for fifteen years, and was instrumental in the development of the curriculum on AAC by the American Speech Language Hearing Association. She is currently editor of the *Augmentative Communication News* newsletter.

The second annual Phonic Ear AAC Distinguished Lecture concluded the ISAAC program. This year's lecturer was David Beukleman, professor of communication disorders at the University of Nebraska-Lincoln. His topic was "The magic and the cost of communication competence". It was a very thought provoking presentation, stimulating much lively discussion amongst friends afterwards. The lecture will be published in a forthcoming issue of the AAC journal and is well worth reading.

Still Time for Swedish Hospitality

No ISAAC conference is complete without some recreation and relaxation, and our Swedish hosts pro-

vided for both. A dinner-time boat cruise through the Stockholm archipelago gave us an opportunity to see the spectacular scenery in the area, and to mingle with other delegates. Another evening we were guests of the City of Stockholm for a buffet supper in its beautiful city hall. This was followed by a tour of the building, which hosts the Nobel prize winners' dinner each year.

As usual there was an ISAAC talent show, with everything from

Scottish dancing to a demonstration of Swedish horn-blowing on an ancient instrument. In between we were entertained with singing, dancing and skits from several countries.

Pre and Post Sessions

For those with endurance and stamina, there were interesting sessions both before and after the regular ISAAC meeting. A seminar on Developing Countries was held on August 11. Participants from many countries heard presentations outlining the growth of AAC in less well-off countries, and shared ideas of ways of better serving those needing help from established countries.

Immediately following the ISAAC meeting, a symposium on Research in Augmentative and Alternative communication was held. This session was fully subscribed, and offered a forum for group discussions on methodology, networking and ways of collaborating amongst researchers.

Back home in our old routines again, we all have wonderful memories of the successful ISAAC conference and the warm Swedish hospitality that greeted us everywhere. I recommend all of you consider attending the 1992 meeting in Philadelphia August 6-11. □



Barry Romich presenting PRC AAC award to Sue Thurston as Lyle Lloyd looks on.

I'm in a Field Trial Now!

KARI HARRINGTON



Kari Harrington was in the original Blissymbol class of 1971 at the Ontario Crippled Children's Centre, Toronto (now the Hugh MacMillan Rehabilitation Centre). She has completed high school at Langstaff Secondary School in Richmond Hill. As a member of the Community Awareness Team of the Easter Seal Communication Institute, Kari has made presentations to various schools, colleges and community groups around the province. She enjoys writing stories and poems and is a regular columnist with Communicating Together.

What excitement! At last, the Bliss-Tel Field Trial is underway. Blissymbols can now be transmitted across the telephone lines from one computer to another.

To use BlissTel, you must have a Macintosh or IBM computer, a modem, a telephone jack (preferably with your own private line) and, of course, the right software.

Another essential is a knowledgeable person who can set up your computer and teach you how to run the various options that BlissTel offers. There are four trainers involved in the Toronto part of the

trial. There's DON, MOM, JAC and WTL, who lives and works in Ottawa, but is very important, because he set up our equipment in the first place. He is also the one who is called upon if there is a problem that our trainers can't solve. I'm sure you have guessed that those letters don't spell out the real names of our helpers. They are the code names that they chose to use for the computer. DON is really Donna McGhie-Richmond. Donna is working with SJO (Sue Odell) and me. Each trial participant needs someone easily available to work with him or her as a facilitator. John Dowling is facilitating for Sue, while my mom is facilitating for me.

MOM is Cathy Fairley. Her choice of code names reminds us all that she is the busy mom of three young boys, but somehow, she is finding the time to train JOE (Joe Jessup). JACK Sim is training and facilitating for JIM (really, Chester Kwaka) and BAR (Aaron Shelburne). Can you guess why he chose the code name BAR?

There are some others on line as well: SAM (Naomi Gibson), the Director of Educational Services at ESCI and KAR (Karen Watson), augmentative communication assistant at ESCI. Shirley McNaughton will be coming on soon. It will be interesting to see what her code will be. I hope she picks an interesting one that's hard to guess!

Getting Started

Trying new things is such fun. The day Bill Lalonde (WTL) came with Donna to set up the computer and get me started, made me think of my excitement the very first day I got my Apple IIE. The Macintosh is very different from the IIE and I love it, just as I'm sure those in the trial who got IBMs love them too. Computer technology has improved so much over the last few years. Computers have become so much more compact and capable of doing many more things.

Right now, I'm using my Mac just for BlissTel and there are three different ways I can use it. I can "talk" with symbols directly to

someone else and have them answer me right back; I can leave a message on someone's "answering machine" (on his or her computer) or I can enter an item on the electronic bulletin board. I don't even have to struggle with the telephone. If I want to call Sue, all I have to do is select her code. The modem dials the number and informs her computer that I'm calling. If she is working at her computer, a message will flash on her screen to say there is a call. Instructions on the screen will help her acknowledge the call; she will "save" the work she was doing, switch over to TALK and then we can COMMUNICATE WITH BLISS. If she is not at her computer but has left her computer on, then I can just leave my message on her answering machine which she will get when she gets back.

Sue and I have sent several messages back and forth so far, and I have been through to SAM on several occasions too. I have not heard a "symbol" from the boys! I think they must be shy! It is frustrating to try to "talk" to them and they don't answer. Of course, the Field Trial doesn't officially start until September and I am writing this in June, so maybe I should be more patient. □

Editor's Note:

Kari is always pleased to get mail from readers around the world. If you have news or a story to share in "Family and Community", write to:

Miss Kari Harrington
16 Jonquil Crescent, Markham,
Ontario Canada L3P 1T4

Correction:

Last issue Kari wrote about the book *Skallagrigg* by Wm. Horwood, published by Penguin Books, 1988. We included incorrect information about where to obtain it.

It is available from:
James Thin Ltd., 53-59 South
Bridge, Edinburgh, Scotland,
United Kingdom EH1 1YS

**This section of
Communicating Together
is sponsored by
Pilot Club International,
Ontario District.**

The Delaware Visions Conference: Growing with the Field of Augmentative Communication

MICK JOYCE

Mick Joyce, an active user of augmentative communication devices, is a physical disability planner for the Wisconsin Department of Health and Social Services. He is also employed by the Trace Research and Development Centre as a consumer technology writer. Mr. Joyce holds a Master's degree in urban regional planning and is completing a second master's degree in health services administration. He was invited to the Delaware conference as a consumer representative.

In March in Delaware and most other places in the northern United States and Canada, the landscape begins to change. The colour is slowly evolving from brown with white patches to a multi-shaded green. The ground starts breeding bugs. The birds increase overhead and bees fly from plant to plant. In anticipation of the change, people begin to see "visions", snapshots of the beauty of the coming season. They see water trickle down rocks passing to streams and rivers. They see a warm, sunny beach with sand that one can squeeze between one's toes.

The same spirit of anticipation was felt at the University of Delaware last March as sixty or so international experts gathered to discuss the future of augmentative communication in the next decade. The ball point pens scribbled. The overhead projector was snapped on and off, as speakers shared ideas ranging from the concrete to the abstract. Most of these people spent their working lives in research labs, behind desks, planning and writing, and in the field assessing clients for new technology. They had a lot to talk about.

Predicting the Future

What would an augmentative com-

munication device look like ten years from now? Would the population using such devices change significantly as the baby boomers aged? Could enhanced computer power be harnessed to make systems more intelligent? What would be the role of government, university research centres, and private industry in the advancement of augmentative communication systems? These questions and others were pondered as speakers gave their visions of the future.

Augmentative communication today, is only about ten years old. Just a decade has passed since tiny computer chips began to be used to help nonspeaking people communicate. Like a ten-year-old boy, the field of assistive technology is not yet sure what it wants to be "when it grows up". Consequently, some of the pioneers of augmentative communication are still willing to explore the woods, look for arrow heads, and tell ghost stories over burning logs.

This sense of adventure and expectation ran through the conference proceedings as speakers expounded on their own special areas of research. These areas included hardware and software, input and output devices, artificial intelligence, public policy, demographic factors, and assessment and service delivery.

With respect to what an augmentative communication device might look like ten years from now, most agreed that hardware will follow the more general trend in computer technology towards smaller, more portable devices. They would perhaps fit into people's pockets and be powered by the sun. The components (keyboard, computer, and voice synthesizer) would be controlled by remote units that users would carry in their hand eliminating the need for wires.

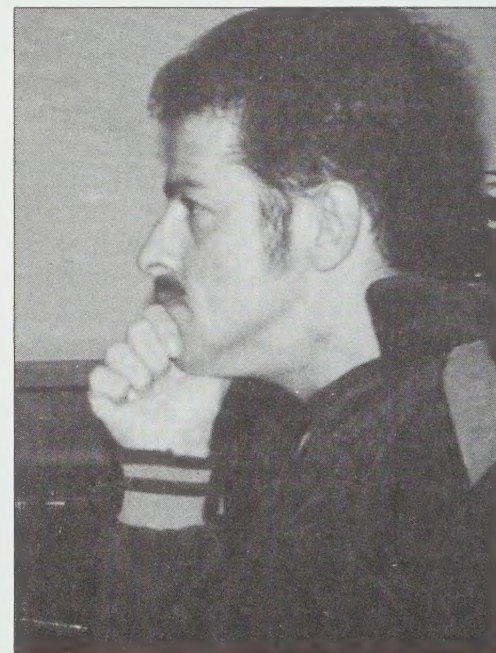
The hardware visionaries also saw an expanded role for these devices in the future. They would not only help users communicate, but, using a radio transmitter, be able to tell users where they are, how to get from one place to the next, and where the closest pizza place is.

Both hardware and software will most likely become more interactive as video and television and computers become more compatible. This would allow a more user friendly environment and people could talk back to their computers asking about the weather, the latest in fashion or what automobile they can afford considering their current budget constraints.

By the same token, such information could be tailored to the individual. For example, an elderly person could be reminded to take a certain medication while alone in a shopping mall. These concepts expand the boundaries of augmentative communication to total environment augmentation, giving the individual, nonspeaking or not, more mastery over an increasingly complex world.

Today's systems are limited in the input they accept. For example, computers will only react to the keyboard or mouse input (or devices which "emulate" these). In some situations they can be trained to respond to voice commands. Input must be fed into the computer in a consistent manner with little variation. Moreover, today's computers receive only one kind of input at a time.

The human body, on the other hand, impaired or not, is capable of sending multiple channels of out-



put. For example, there is eye and head movement, intonation, and other behaviour that could be input into computers. In the future, many experts think that computers will be able to track such behaviour. The purpose of this concept is to increase the speed of input, with less effort by users.

This idea of increasing speed while decreasing effort is used in a broader context and referred to as rate enhancement. Other methods of rate enhancement were discussed as well. For example, word usage research currently being conducted will make word prediction systems more accurate than they are today. Predicting a short list of words that users may select as their next word depends on their age, race, education and other demographic factors, along with the subject which they are currently speaking about. Present systems take none of these factors into consideration and are quite primitive in nature. Some people had visions of an individualized prediction system; one would plug in different individual factors, and the computer would compose the user's own personal prediction system. Some even suggested that there would be "intelligent" systems in place able to make small decisions, to aid in word prediction and other rate enhancement schemes.

An Aging Population

No one who has environmental knowledge has to be reminded that the world's population is growing older. As it does, the people who use augmentative communication devices will age. Visions of future users were not clear and conference participants suggested more research be conducted in this area. In general, however, there was a consensus that users would be more cognitively impaired. This makes it necessary that systems be more "user friendly", easier to learn, and simpler to operate than today's systems.

As was mentioned earlier, the field of augmentative communication is only about ten years old. Before boys reach the age of ten, they don't much care what they look like. Mothers have to remind them to change their dirty underwear, to take a bath and to put on clean clothes once in a while. These

boys are more concerned about increasing their play time. Add on a few more years, however, and concern changes. One tiny "zit" is cause for great alarm.

There are parallel changes taking place in the field of augmentative communication as it enters its second decade of life. The experts in Delaware called it "entering into the public policy phase". Like boys, augmentative communication will be much more concerned about how it looks. Evaluations and cost will become major concerns as equity schemes will be played out in the political arena. Assessment of individual needs will become critical as forms of rationing are developed.

Involving the Consumer

Finally, there was the issue of consumer involvement. To draw on the above analogy, it is a little like a ten-year-old boy's hesitation to be involved with girls. Girls are different. They say weird things; they may make one who is "totally cool" get all red in the face. At age ten one realizes that one must get involved some day with girls, but just where and how is not clear yet.

Speakers at the "Visions" conference came to similar realizations. Consumers must be involved. However, no forum was scheduled on

this important topic and although speaker after speaker mentioned it, few concrete ideas were generated. Like the analogy above, the only safe "vision" to have at this point is that nature will take its course and any anxiety over the manner will be like throwing sand into the wind. □

Join ISAAC Now

The International Society for Augmentative and Alternative Communication (ISAAC) offers four types of memberships:

- Student Membership
- Active Membership
- Contributing Membership
- Corporate Membership

Members of ISAAC are entitled to reduced rates for: *Communicating Together*, *Communication Outlook*, *Augmentative and Alternative Communication* (AAC journal)

For membership application and other information about ISAAC write ISAAC, P.O. Box 1762, Station R, Toronto, Ontario, Canada, M4G 4A3.

From the leading edge of the nonspeech communication movement

AAC: AUGMENTATIVE AND ALTERNATIVE COMMUNICATION

*The Official Journal of the
International Society for Augmentative and Alternative Communication*

Editor: **Lyle L. Lloyd, PhD**, Professor of Special Education, Professor of Audiology and Speech Sciences, Purdue University

International in scope and transdisciplinary in approach, AAC presents **articles** demonstrating practical applications for your work, **case studies** with direct implications on program development, assessment, and intervention, **position** and **research papers**, **conference abstracts**, and much more. You'll get **concrete, practical applications** in a journal that stimulates development and improves service delivery in nonspeech communication. **ORDER YOUR SUBSCRIPTION TODAY.**

Quarterly / \$48/year personal / \$75/year institutional
(add \$10/year to subscriptions outside U.S.)

Call **FREE** to order **1-800-638-6423** from anywhere in the U.S. except Alaska. In Maryland, call **COLLECT 528-4105**. Or send check or purchase order in U.S. dollars only to the publisher:

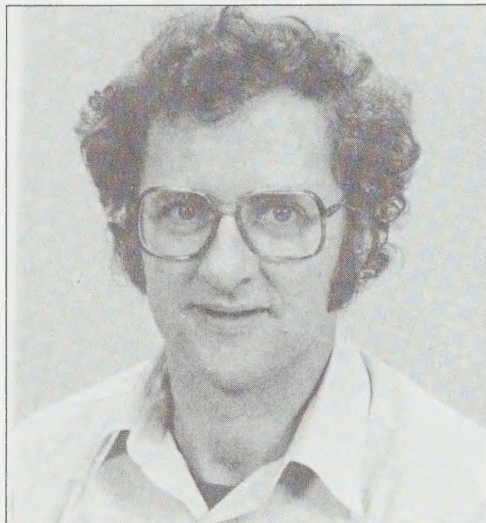
Williams & Wilkins

P.O. Box 23291
Baltimore, MD 21203 USA

266 Fulham Road
London SW10 9EL England
AACCOMM 50864 88

RESNA, Research, and Ruminations about TH... Words

GEB VERBURG



"Research and Publications" is written by Geb Verburg, who has been involved in the field of augmentative and alternative communication (AAC) since the mid-seventies. A cognitive scientist, Mr. Verburg is currently working as coordinator of the "Research in Cognitive Development Program" of the Rehabilitation Engineering Department at the Hugh MacMillan Rehabilitation Centre, Toronto.

I was fortunate to be able to attend the recent RESNA meeting in Washington, D.C. and want to draw attention to some of the work presented at that conference. This article will also draw upon visits that I paid to Holland, and to the DuPont Institute preceding the RESNA conference. First, however, a brief foray into the subject of attitudes and our way of phrasing remarks.

They, Them, These people ...

In the course of the last six months I have become more sensitive to, and more irked by the use of the terms "they", "them", "these people", and, particularly, "those people" in reference to persons who have a disability. At RESNA and at conferences I attended immediately preceding, I was struck

by the distance between the professional and the client that is created by the use of these terms. A speaker may for example use a phrase like "Those people have difficulties...", or "Technology can help these people".

In each of these cases, the speaker did not intend to discriminate or "put down" the persons talked about, yet, the effect is one of alienation. Speakers, in using third person pronouns characterize themselves as persons who do not have a personal (I-You) relation with people who are disabled. Or, alternatively, they are persons who have not yet fully adapted to the reality of accepting persons with a disability as full-fledged partners in the rehabilitation enterprise.

Research Foci at RESNA

RESNA, as a conference and as an organization of clinical and technical persons working in and using rehabilitation technology, has attained a maturity and poise that was reflected both in the number, confidence, and high spiritedness of the attendees, and in the fact that the technology actually worked. If you do not already belong to the organization and/or have not attended the annual conference I recommend you to make an effort to go to Kansas City, Missouri, in 1991, or to Toronto, Ontario, Canada in 1992.

I want to highlight some research efforts that go beyond the level of individualized or even conglomerated projects that are so typical in AAC and rehabilitation research today. These efforts are taking place — among other places — at the Microcomputer Centre of the University of Dundee, Scotland; at the Applied Science and Engineering Laboratories (ASEL) of the DuPont Institute in Wilmington, USA; and at the Institute for Revalidatie Vraagstukken (IRV) in Hoensbroek, Holland.

In Dundee, Scotland, Alan Newell, John Arnott, and Norman Alm and their colleagues at the Microcomputer Centre, University of Dundee, are carrying out about a dozen indi-

vidual research projects, the outcomes of which will be integrated in an amazingly powerful AAC device. The projects explore ways in which augmentative communication can be enhanced and speeded up. Four main projects address; input acceleration (PAL), sentence prediction (TALKBACK), means to automate the formalism of conversations (CHAT), and ways to make it easier to re-use expressions and conversational material (TOPIC). These four key projects are supported by projects investigating the use of hypertext, semantic networks, and a project investigating the expression of emotion in synthesized text. The group seeks to apply its results to areas other than communication prostheses. Thus the input acceleration techniques are being applied as writing and spelling tools, as well as in workstation design and broadband communication systems. The unique aspect and considerable promise of this research lies in the combination of three or four excellent ideas and the marshalling of appropriate high technology in a coherent research effort.

A.I. Dupont Institute and AAC Research

The second group of researchers is united less by a common mission than by a common funding source and common task. The Rehabilitation Engineering Centre (REC) for alternative communications at the A.I. DuPont Institute is developing into a veritable powerhouse of AAC research. Under direction of Richard Foulds and with a team of colleagues that includes Beth Mineo, Patrick Demasco, Eugene Ball, Lori Miller, Cathy Rookard, and Kathleen McCoy, with Bruce Baker as a frequent collaborator, this centre contributed nine papers on AAC to the RESNA meeting. Like the Scottish group, the Dupont researchers address the high tech issues of prediction, and intelligent or expert systems. One of the approaches that I find intriguing is the LOGO-like language that is being developed to adapt communication

systems. Both clinicians and users are to be able to adapt selection techniques and vocabulary displays. I would hope that the user will also be able to enter new vocabulary items. Such capabilities would really enhance users' control of their communication systems. Members of the group also addressed practical issues concerning vocabulary management, and a needs survey. I am looking forward to the results of a survey of software needs by Demasco.

A presentation by Miller described a communication logging system which keeps track of all inputs and outputs of an AAC system. Some of the surprising findings were that some clients never used the device during the test period (although asserting the opposite). Other findings were that words, that were in the vocabulary, were spelled rather than selected directly, and very long pauses were evident between letter and word selections. This type of continuous measurement of the use of AAC or any rehab devices may look somewhat like snooping, yet it is the only way to obtain accurate usage data, short of the immersion of the researchers in the home or living environment of the clients.

New Initiatives in Holland

In Holland I had the pleasure of visiting the Institute of Rehabilitation Research (IRV) and the Technical University of Delft. Although my visit did not focus on AAC matters, I had an opportunity to read two publications: one (van Balkom and Welle Donker-Gimbrere, 1988) predating the formation of a Dutch/Flemish chapter of ISAAC, and one following this event (van Balkom et al 1989). Members of this group, which encompasses six clinical centres in Holland and Belgium, are involved in an interesting research project concerning graphic symbol systems. Purdue University (Lloyd) is cooperating in this project — a survey concerning the use of graphic symbols. My interest in the project stems in large measure from the fact that researchers will be able to complement information contained in the graphic systems data base produced at Blissymbolics Communication International. I believe that there are still a number

of interesting issues to be unearthed in the area of graphic symbols and their use. My second reason for being impressed with the Dutch AAC group is that in a relatively short time the clinicians and researchers have managed to catch up with what they perceived to be a lag in their AAC research and development.

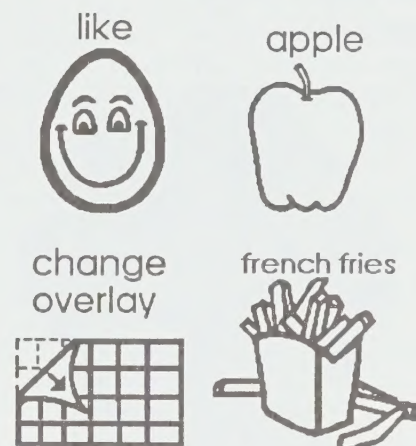
I have ignored technical developments carried out by other researchers and manufacturers in the United States. I also have completely overlooked the tremendous growth in AAC and general rehab device provision in the USA as a consequence of the "TECH ACT". One of the very exciting developments that is beginning to reach a form of maturity is the database systems incorporating service facilities and centres. These data bases will very soon become clinically useful and one can only hope that they will continue to be maintained and updated so as to retain their usefulness. Many countries including European government programs are actively developing well thought-out databases that will contain sources of devices, services, and information which will become accessible to service providers in all of Europe. Here to, I hope this information will be available from the very beginning to clients as well.

Research in AAC looks vibrantly alive. There is duplication, competition, and of course there is the inevitable reinventing of wheels, but that is essential to the generation of criticism. Without re-developing and without re-researching there cannot be criticism or conflict from which in turn new research and new developments grow. □

References:

- RESNA (1990). *Capitalizing on Technology*. Proceedings of 13th Annual RESNA Conference. Washington DC. June 15-20.
- van Balkom, H. and Welle Donker-Gimbrere, M. (1989). *Kiezen voor Communicatie*. Intro, Nijkerk. Holland.
- van Balkom, H., Bokweg, C., van Geel, R., Koerselman, E., van Roy, A., and Welle Donker-Gimbrere, M. (1990). *Ondersteunende Communicatie*. ISAAC-NF c/o Stichting CIAC Crailoseweg 116, 1272EX Huizen, Holland.

The Picture Communication Symbols (PCS)



Over 1700 symbols
in 1 inch & 2 inch sizes

The PCS symbols are available in:

- Reproducible Books
- Stamps
- Stickers
- Games
- Educational materials
- Symbol Display Materials
- Classroom aids
- Computer Programs for making communication boards, overlays, and aids.

Call or write today for a free catalog!

Mayer-Johnson Co.
P.O. Box 1579
Solana Beach, CA 92075
U.S.A.

Phone:
(619) 481-2489

Bliss Survey of Speech Impaired Canadians

DEBORAH FINN



Deborah Finn has been with the Government of Canada Department of Communications (DOC) for nine years. She is presently Informatics Project Officer. As a writer/researcher within DOC, she conducted a survey on the communication disabilities of Canadians. She submitted the following article about the survey.

I have just spent most of three years working on a survey of speech impaired Canadians, to find out what kinds of disabilities they have, what kinds of computers they use, and how they communicate. This survey was part of a project to develop a communications system that transmits Blissymbols from one computer to another, using regular telephone lines.

My department's involvement with this project began in 1985, when an Ottawa company called IDON Corp. sent us a proposal to set up a Bliss telephone system. This was called the Blisscom project and over the next couple of years, we were able to provide the funding for its development. By the end of 1986, IDON, Blissymbolics Communication International (BCI) and a group of researchers at McGill University were testing a prototype of Blisscom in Montreal with four cerebral palsied young

adults.

In March 1988 funding was secured from both the Department of Communications and the Secretary of State for a four-year project to develop a Bliss telephone for a wider market (BlissTel).

My first involvement in the Bliss-Tel project was in the summer of 1987. The goal of the project is to allow Bliss users to talk directly to each other with the help of computers, either face to face or at a distance, without always having to rely on an interpreter. It sounded like an interesting project to me, but then I can pick up a telephone or chat with my co-workers without much effort.

It was not until my boss, Mary Frances Laughton and I paid a visit to Shirley McNaughton at BCI, that I began to understand how important this project really was. Shirley introduced us to some Bliss users and told them why we were visiting. As soon as they heard about BlissTel, they became really excited! I had not realized what a joy it would be to be able to speak for yourself, instead of through a third party.

How Do You Find the People?

Early on, it was decided we would have to find out how many speech impaired people there are in Canada, in order to meet as many needs as possible. The first place we looked for information was the report published on handicaps after the last Canadian Census. The trouble is that speech impairment is not identified as a separate disability; it's considered the result of "something else". For example, not everybody with cerebral palsy has a severe speech impairment and not everybody with a severe speech impairment has cerebral palsy. So the Census was not much help to us.

The next step was to ask the help of provincial governments. All provinces have a health department and an education department. Some have departments set up to look after disabled people. Some have social services departments. We sent out letters to all these depart-

ments asking them if they could help us locate people in that province who could use a system like ours or, if not, direct us to agencies or organizations that would put us in touch with these people.

I also wrote to every school board in Canada to ask for help in locating students, past and present, who could be included in our survey. I also got a lot of replies from people saying "we don't have the kind of information you're looking for, but get in touch with such-and-such agency or department". I followed up every lead I could get and in the end, I located about 3,300 people who might fill out questionnaires.

Questions to Ask

Meanwhile, we had to decide what we wanted to know, and what questions to ask. We needed to know what had caused the speech impairment of the person answering the questionnaire, how well he/she is understood in talking to people (family members or friends and strangers), what kind of setting he/she lives in. We asked respondents about their reading level and the kinds of material they read (books, newspapers and so on); whether they sign; and whether they use a communication board. We also gathered information on the kinds of symbol languages or systems they use. We asked them if they use computers; which ones; which devices they use with their computers and how they access them; and what they use their computers for. Finally, we asked how many of our respondents could have access to a phone line, either a private line or through a switchboard and how many of them had modems for their computers.

Planning the questionnaire took from July, 1987 to October, 1988. The questions had to be decided upon and the wording had to be as precise as possible. The questionnaire also had to be tested by people who were not familiar with the subject. My co-workers and their families — even my own mother — filled in questionnaires and made suggestions on how to

and made suggestions on how to make the questions clearer. Everything had to fit into four pages, because we felt that if the questionnaire was longer, people would not complete it. If it was much shorter, we would not get the information we needed. Once we had a questionnaire everyone was happy with, it was translated from English to French, then printed.

Finally, in the middle of October 1988, we mailed out the questionnaires and asked people to return them to us by the middle of November 1988. Answers were still trickling in during the spring of 1989, and I received the last return on August 14, 1989! A total of five hundred and ninety-eight people replied to the questionnaire.

Crunching the Numbers

The next task was "crunching the numbers", that is, figuring out what the results of the survey were, and what they meant, by breaking the data down into information that would be useful in planning the field trial. How many of the respondents have cerebral palsy? Do they have multiple disabilities or is cerebral palsy the only one they identified? Which communications languages do they use? Have they got a computer? Can they use a regular keyboard to access their computer? In the conclusion of the report I wrote:

"From the returns we received, we can determine that the people in our survey sample are most likely to have cerebral palsy, live in the family home and that it is unlikely they will be computer users. Their speech is likely to be understood by people who are familiar with them, e.g. family and friends, although they may have difficulty in being understood by strangers.

Those respondents who use or have used computers tend to be Apple IIe users. They generally read at a grade 1 to 4 level, choosing picture books or books as their main reading material. Most of them use a conventional keyboard to access their computer. If adaptations are required, a voice output is the one most likely needed. If these people use an augmentative language or symbol system, it will be Blissym-

bolics. While they generally have access to a private phone line or phone jack, they are less likely to have a modem."

By the time I finished the survey, I came to the conclusion that the average "able-bodied" Canadian probably doesn't understand what the word "disabled" really implies. For many of us, it's a word that conjures up a picture of a person in a wheelchair. But we don't really stop to think what it means to the person in the chair.

Last fall, I caught a bad cold and developed laryngitis. It was frustrating to be unable to control my vocal cords. I started with a low voice and ended up with a squeak, or worse, no sound at all. My boss had been away from the office for a few days and I had things I needed to tell her. But I couldn't talk enough even to call in sick, so I wrote a long note of all the business details I wanted her to know and had my mother read them to her over the phone. It worked, but it was not the most satisfying way I have ever used to communicate with anyone. I kept wishing that I could communicate directly with my boss, instead of having to go through a third party.

That is what we hope the Blissphone will do for many people: give them a direct line to the rest of the world.□

Editor's Note:

Deborah told us the final report is now available in either English or French. If you would like a copy of the *Report of the Bliss Survey of Speech Impaired Canadians*, please contact: Deb. Finn, Department of Communications, 3701 Carling Avenue, P.O. Box 11490 Station H., Ottawa, Ontario K2H 8S2 Telephone: (613) 990-4297.

Position Available

Augmentative Communication Consultant

Job Description:

The Augmentative Communication Service (ACS) is a trans-disciplinary department of The Hugh MacMillan Rehabilitation Centre (HMRC) serving children and young adults across Ontario. ACS requires a clinician specializing in the field of augmentative and alternative communication. Responsibilities to include clinical, educational and research with significant community outreach. Extensive ongoing professional development is offered within this challenging and innovative work environment.

Qualifications:

- Master's degree in Speech-Language Pathology or equivalent
- Eligibility for registration with O.S.L.A. or
- Master's degree in Special Education
- Two years experience and interest in AAC preferred

Salary:

- Starting: \$40,369
- Based on a 37.5 hour week
- Extensive Benefit Package

Submit Resume to:
Human Resources Department
The Hugh MacMillan
Rehabilitation Centre
350 Rumsey Road
Toronto, Ontario
M4G 1R8

Have You Moved?

Please remember to let us know your new address. If possible send an address label from a past issue.

Mail to:

Communicating Together
250 Ferrand Drive,
Don Mills, Ontario, Canada
M3C 3P2

SYSTEM DEVELOPMENT NEWS

NEW BLISSYMBOLS FOR TEACHING HUMAN SEXUALITY

International Panel

After eighteen months of study, deliberation and debate, the Symbol Office is pleased to announce that over 100 new Blissymbols related to **Human Sexuality** have been approved by the Symbol Committee and added to the Standard Vocabulary. During 1988 and 1989 the International Panel met three times to share ideas, first at the ISAAC Conference in Anaheim, California, then at the BCI International Affiliate Meeting in Brussels, Belgium and finally at the System Development Seminar in Jerusalem, Israel.

Readers may be interested to know that the impetus for these symbols did not originally come from panel members. Numerous requests came to BCI - from the United States, Canada, Australia and the United Kingdom. AAC users were growing up, facing new challenges related to adolescence and needed relevant vocabulary!

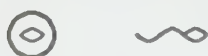
Blissymbols for Teaching and Communication

The new Blissymbols were designed for teaching *and* communication. The extensive vocabulary enables instructors to teach the basic concepts underlying sexuality and to explain relationships between the concepts. It enables students to ask questions and to clarify their understanding.

Teaching Example

The concrete pictographs:

egg sperm



unite to demonstrate the more abstract concept:

conception, fertilization



(combination of sperm *and* egg)

and to explain related concepts,

pregnancy



(conception + woman)

miscarriage, abortion (spontaneous)



(to cancel + pregnancy)

abortion (induced)



(to cause + miscarriage)

Topic Areas

The new symbols can be grouped into **ten** major topic areas:

1. male



(man + description indicator)

2. female



(woman + description indicator)

3. body parts common to both sexes:

urethra

bladder



(tube + urine)



(container + urine)

4. reproduction



(conception + to cause + baby)

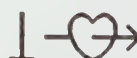
5. birth control



(to stop + conception)

6. social relationships

sweetheart



(person + to love)

7. sexual activity:

**sexual intercourse,
copulation**



(to combine + genitals)

8. illegal sexual acts:

prostitution



(to combine + genitals + money)

9. feelings:

intimacy



(feeling + close)

10. additional related symbols

private



(to close + public + description indicator)

Blissymbols used herein are derived from the symbols described in the work *Semantography*, original copyright © C. K. Bliss, 1949.

September 1982, C. K. Bliss granted an exclusive, non-cancellable and perpetual, world-wide license to Blissymbolics Communication International, to provide standards for the application of Blissymbols, for use by handicapped persons and persons having communication, language and learning difficulties.

A Sample of New Blissymbols for Preschoolers

The BCI Affiliate in the United Kingdom is currently working with Ventura Publishing Ltd., London, U.K. to include Blissymbols in a version of Eric Hill's delightful *Spot's Big Book of Words*. As a result of this project, several new symbols were approved which are appropriate for preschool age children.

Examples:

puzzle, jigsaw puzzle



(picture + piece: picture made from many pieces)

seesaw, teeter-totter



(pictograph)

playground



(place + to play)

**jump rope
skipping rope**



(linear thing + to jump + thing indicator)

To Obtain New Symbols

BCI has recently published *New Blissymbols 1980 - 1990*, a 62 page document which contains all the symbols which have been added to the system since the publication of *Blissymbols for Use*, Hehner (1980). The new sexuality and preschool symbols are included in this document. To obtain your copy, send a cheque or money order for \$10 to:

Symbol Office,
Blissymbolics
Communication
International, 250 Ferrand Dr.
Suite 200, Don Mills, Ontario
M3C 3P2
Telephone: (416)421-8377
Fax: (416) 696-1035

Talking Blissapple Program and the New Blissymbols

For those readers using the *Talking Blissapple* software for the Apple II + and IIe computers, BCI has a list of segment codes for all the new Blissymbols (1980 - 1990). Following instructions in the manual one can use these codes to add new symbols to a user vocabulary.

To obtain your copy send a cheque or money order for \$5 to:

Blissymbolics
Communication
International, 250 Ferrand Dr.
Suite 200, Don Mills, Ontario
M3C 3P2
Telephone: (416) 421-8377
Fax: (416) 696-1035

DONNA MCGHIE-RICHMOND

The Paraphrase is written for those who are moving into traditional orthography. It offers an independent reading opportunity for the growing reader. The Paraphrase is written this issue by Donna McGhie-Richmond, a special education teacher who is currently consulting with the Easter Seal Communication Institute as a trainer in the Blissel Field Trial project (see page 5 and page 10.)

All This and I Still Need to Talk

Robin Wood has a dream. She wants to teach children with special needs. She talks about the trouble she has communicating.

* * * * *

My eyes and my hands were my first voice. Then I learned Blissymbolics. Blissymbolics helped me say what I wanted, but I still had trouble starting a conversation.

Next I used a Blissymbol board and an Apple computer. When I talk to someone I like to look at them. This method distracted the person I was talking to. It was also complicated.

I was very excited about using the TouchTalker. I soon became disappointed with the switches for it. I tried a head switch, a knee switch, three kinds of hand switches and a head pointer. Finally I used my fist with a hand splint.

In spite of all of these tools for talking, I was not happy with the way I was communicating. I now use my word board. At the moment, it is the best method I have. I still use my Apple computer for writing.

Soon I will be living with two other adults. After high school, I want to study Early Childhood Education at college. When I teach I want to be able to talk to my students spontaneously. My wish is for a better way for me to do this.□

To Readers of Paraphrase

This story is from Robin Wood's original article that appeared in *Communicating Together* Volume 8, Number 2, June 1990.



Robin Wood.

Learning to Ask Questions

BARBARA REID



Barbara Reid is a consultant with the Easter Seal Communication Institute. She has been involved in the field of augmentative communication since 1976, first in England and then in Canada. She has worked in research and training as well as consulting, and has co-authored two books and several articles on augmentative communication.

In response to our recent survey, readers requested more articles on "old fashioned communication boards". There were also several requests for articles about people who use augmentative communication and who are developmentally disabled. "Effects of a pragmatic teaching strategy for requesting information by communication board users" by Dianne Angelo and Howard Goldstein relates to both areas of interest. The article describes a procedure which was successful in teaching four developmentally delayed students to ask appropriate questions using their communication displays. The students' cognitive delays were in the mild to moderate range, with chronological ages ranging from about five to seven years, mental ages from thirty-one to forty-three months, and receptive vocabulary ages a few months lower overall. All four students had communica-

tion displays which they accessed with a pointing response. The displays varied in size from 100 to 200 symbols, which were rebuses or photographs.

Each student had more than one communication mode available (gestures, symbols, vocalizations and spoken words). The authors note that, while symbols were the least ambiguous mode available to the students, they were more likely to use gestures, vocalizations or poorly articulated words to initiate communication. This observation relates to a common problem which has been addressed in a previous column (*Communicating Together*, Vol. 7 No. 3 p. 11), the problem of students who know the meaning of many symbols but rarely use them to initiate communication.

Who, What and Where

Angelo and Goldstein focused on three question symbols — *who*, *what* and *where*. Before they started the training phase, students could point to the correct symbols when asked to find them, but did not use them even when they were presented with an appropriate situation and had their symbol displays in front of them.

The authors designed a five-step training procedure which started with an "occasioning event" (e.g., the trainer saying "there's something in this bag" and giving a questioning look), followed by a ten second delay (to allow the student to point to the symbol "what"). If the child failed to point to the symbol or pointed to the wrong one, step two involved the trainer pointing to the correct symbol. Steps three to five involved more prompting, including verbal instruction ("Show me *what*"); verbal plus imitation (point to the symbol and say "show me *what*"); and finally, verbal plus physical prompt (say "show me *what*" and guide the child's hand to the symbol).

The results of the training procedure were very encouraging. Prompting steps three to five were never used, because all four students responded readily to step

two, where the trainer simply pointed to the correct symbol.

The training procedure can be summarized as follows:

Readiness

- Using specially drawn picture cards, test to see whether the students can answer questions involving *who*, *where* and *what*.
- Add the question symbols to the students' displays, if necessary, and teach them to locate the symbols on request.
- Present occasioning events which should elicit an appropriate response and note the students' use of the question symbol (i.e. baseline trials).

Training

- Present the child with an occasioning event and a questioning look and wait ten seconds for a response. For example, arrange play materials so that a doll is approaching a toy house. Say "someone is coming to the door", and look puzzled.
- If the student does not respond within the ten second delay period, use the prompting sequence described as steps two to five (above).
- Begin to train the second question after the student has reached criterion of 80% correct for two consecutive days on the first.
- Begin to train the third question after the student has reached criterion on the second.
- Retrain all questions together, until the student has reached criterion on three questions simultaneously.

Once training was complete, the students could use their symbols for *where*, *who* and *why* in response to situations where these questions would be appropriate.

The researchers paid careful attention to generalization throughout the study. Their training strategy used realistic situations for prompting the questions, rather than a "drill" approach. The play situation built up to the point where the appropriate question was the next logical move in the sequence.

Planning for Generalization

There was also a careful transfer of learning from the training sessions to the classroom. The trainer, the teacher and the teacher's aide regularly conducted probes, sessions where classroom materials were used to set up appropriate questioning situations and the students' responses were recorded. It is interesting to note that the students responded appropriately to the trainer, the person they worked with in the special sessions, before they responded to the teacher or aide. In the end, they did generalize from the training setting to the classroom, and from the trainer to other classroom staff, but this took several sessions.

Generalization across question forms did not occur spontaneously. The study's baseline data show a consistent pattern across all four students. For example, the first student answered no *who* questions before training began. Once training on this question started, he quickly increased his appropriate use of *who*, but did not generalize this to use of the *what* question or the

where question. Once *what* was included in training, he used it much more, but still failed to use *where* until it was specifically trained.

Angelo and Goldstein included another measure in this study, a "social validation" phase. They wanted to know whether trained observers of communication skills could see any differences in these students before and after training. The raters watched videotapes of the students, not knowing which tape was the "before" or "after" one. They noticed differences in a number of factors, including use of the communication board, child questioning, and adult talking (which declined). Two other adult behaviours, questioning and responsiveness, did not change significantly.

This study highlights two important points related to communication board use. First, although a student may know what a question is, and know a symbol for that question, the student may not use the symbol for initiating communication, even in the most obvious circumstances. Their second point

is that, with very little training, students can learn this skill, and generalize it across settings and people. □

Reference:

- Angelo, D. and Goldstein, H., (1990). Effects of a pragmatic teaching strategy for requesting information by communication board users. *Journal of Speech and Hearing Disorders*, 55, 231-243.

Single Switch Software

• Join The Circus!

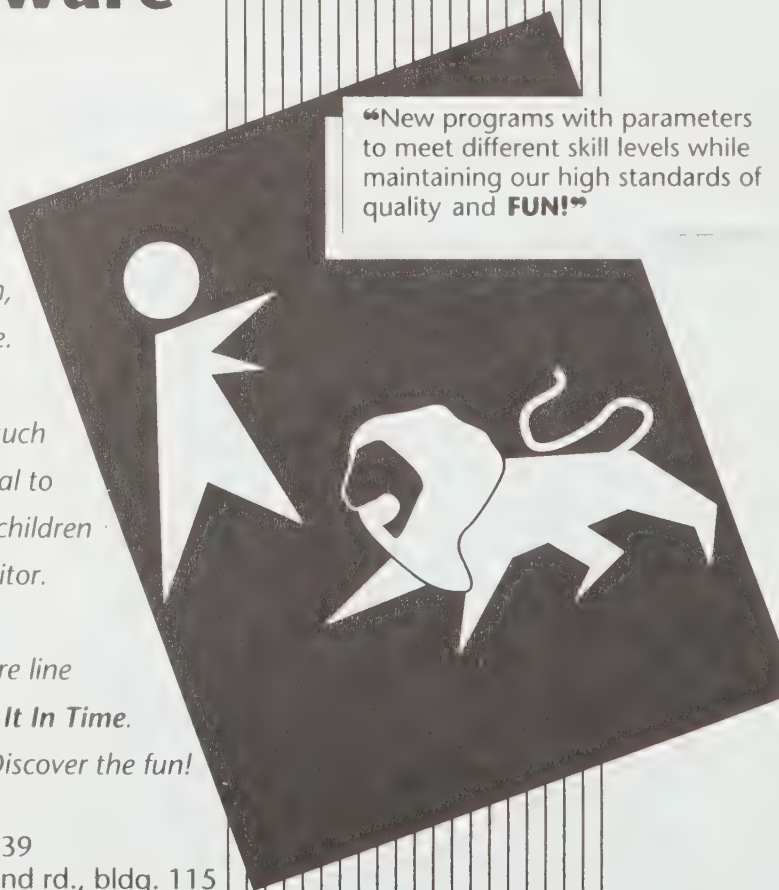
This exciting program takes place in the center ring with single switch input controlling the action. Three circus acts feature a juggling team, a magician, and a lion tamer! Four fun levels of play are available.

Special features have been placed in this program, such as a green light on the screen providing a visual signal to hit the switch, auditory cueing, and action delay for children who need some time to refocus attention to the monitor.

*Other entertaining titles in our single switch software line include **Learn To Scan**, **Make It Happen**, and **Make It In Time**. All have variable parameters and colorful graphics. Discover the fun!*

 don johnston
**developmental
equipment, inc.**

p.o. box 639
1000 n. rand rd., bldg. 115
wauconda, illinois 60084
312•526•2682



Collaborative Consultation: A Model of Service Delivery (Part 2)

NAOMI GIBSON

Naomi Gibson is Director of the Educational Service Program of the Easter Seal Communication Institute (ESCI). She has ten years experience teaching in the field of special education. Prior to joining ESCI, she was with the Computers in Education department of the Ontario Ministry of Education. She organized an ESCI sponsored symposium on Collaborative Consultation held last February at Cedar Glen, Bolton, Ontario.

In the previous edition of *Communicating Together* we presented a synopsis of Anne Jordan-Wilson's presentation at ESCI's Symposium on Collaborative Consultation held earlier this year. The symposium brought together educators, and professionals from Augmentative Communication Services within children's treatment centres across the province of Ontario.

The second major address of the symposium was given by Stephen Calculator who is an associate professor in the Communication Disorders Department of the University of New Hampshire. Focusing on collaborative consultation, his presentation complemented Anne's delineation of three existing models of service by linking it to the "Environmental Model" of her presentation.

During his address, Stephen provided a definition of collaborative consultation, and explored a rationale for its implementation. Referring to the literature and to recent research, he outlined some of the principles of, and behaviours observed in successful consultations. Drawing on his own experiences as a consultant to children with severe disabilities, and his involvement with INSTEPP (See Editor's Note) he was able to illustrate the issues with examples with which participants could readily identify.

A Definition of Collaborative Consultation

Collaborative consultation was defined as:

"An interactive process that enables people with diverse expertise to generate creative solutions to mutually defined problems"

In other words, collaborative consultation recognizes that the person receiving the consultation also possesses expertise. It has built into it the goal of self-sufficiency for the person receiving the consultation, rather than focusing on a consultant's response to a crisis situation. The model does not involve a consultant setting down a mandate for the students, rather it involves a consultant going beyond observing the student and making recommendations, to working together with the teacher, developing mutual solutions to problems that have been identified within the student's educational program

A Rationale for Collaborative Consultation

Stephen acknowledged that there is little statistical data to show that children's rate of learning increases more significantly in situations involving collaborative consultation. However, as he indicated, a rationale for this model of service delivery can be found in the social validation of its benefits, evident in anecdotal reports, questionnaires about 'best practices', and statements in position papers on the topic of integration of students with severe disabilities into

regular school programs, where corresponding objectives and strategies are addressed.

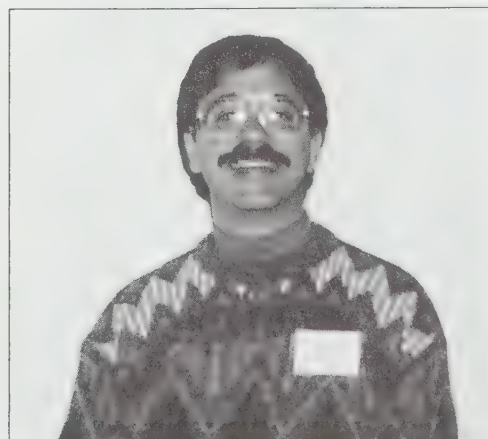
Repeatedly there is support for service delivery to children with severe communication disabilities in an environment that is characterized by:

- an emphasis on teaching functional skills
- assessment in the natural educational setting
- on-site interventions (i.e., within the day-to-day educational setting).

Support for a collaborative model of consultation contained in a hand-out which Stephen distributed, suggested that:

- students are involved in skill instruction more often in more environments (It is not only when the direct-service consultant is present that the student practises "communication strategies".)
- classroom confusion is decreased when fewer professionals are coming in to implement programs
- goals and objectives can be better coordinated with less chance of conflicting or fragmented goals
- professionals increase their skills when they teach them to others and have an opportunity to increase their own skills when they learn about other professionals' roles
- combining the talents of a team of professionals and parents offers the opportunity for more creative problem-solving
- students are able to acquire, maintain and generalize skills that they learn in meaningful contexts with natural cues and reinforcements
- professionals are encouraged to share information and strategies when they work together in natural, daily routines
- programs are better coordinated with therapy objectives, truly addressing the communication and motor demands of the students' daily activities
- more staff are able to support students in class, school and community environments.

Stephen stressed that a successful educational placement for a student with communication exceptionalities (or any exceptionalities, for that matter) cannot occur when the



Stephen Calculator

teacher has limited skills, knowledge, support and resources. The desired educational outcomes do not occur spontaneously in *any* placement. They must be nurtured within a program modified to achieve them.

Checklist of Behaviours Frequently Observed in and Associated with Collaborative Consultation

Collaborative consultation often involves helping teachers learn how to make good use of a consultant — the ability to pose useful questions and to identify what they really want from the consultant. For the consultant, the main shift in moving into this model is in moving from direct into indirect service delivery, working with the teacher as a mentor or coach and becoming a team player, rather than working directly with the student. Stephen provided the following list with which to evaluate the extent to which a team is operating in a collaborative mode:

- respect and mutual sharing and learning among all the members of the team
- cooperative ownership of goals
- situational leadership: expertise of each team member varies with the specific situation/activity/goal
- change occurs with minimal confrontation
- an abundance of on-going feedback and reinforcement: frequent interaction between the teacher and the consultant
- active listening and rephrasing during discussions
- frequent questioning during discussions
- acknowledgement of feelings among team members
- frequent observation by members of the team along with day-to-day decision-making about the goals, objectives and strategies
- planned change: avoidance of crisis-intervention consultation.

It was not Stephen's intention to suggest that each of these features exist *only* in collaborative consultations. However, it is unlikely that they would be present together in other models of consultation.

Barriers to the Implementation of Collaborative Consultation

The participants were very supportive of the idea of collaborative consultation but recognized the barriers that can deter conviction and good intention. Because of the group's mutual focus on the situation in Ontario, the list that was generated clearly reflects the Ontario scene. However, comparing our list with one prepared previously by Stephen and Cheryl Jorgensen for INSTEPP, there are obviously wide-spread common issues that need to be addressed when a move toward collaborative consultation is being organized. Here then is the list of barriers prepared by the participants:

1. Difficulty in getting all the team members together
2. Professional territorial boundaries
3. Geographic, organizational or government boundaries
4. Staff discontinuity (eg., staff changes)
5. Costs and funding
6. Attitudinal barriers (eg., resistance to change) and "traditional" hierarchy of professionals
7. Policies and perspectives of government departments that conflict with the collaborative-consultative model
8. Lack of time, energy and opportunity to develop new skills
9. Difficulty in reaching consensus about goals and agendas among members of the team (distance between goals)
10. Lack of commitment or resources to follow through on goals
11. "Pecking order" amongst individuals, roles or agencies
12. Jargon distinctive to each professional group
13. "Prescription" of programs or devices and the prescriptive model
14. "Hidden" stakeholders who influence the process but don't (fully) participate
15. Lack of opportunity for feedback to the team
16. Expectations which build up during the waiting period

Stephen had more points to contribute based on the work of the participants in the INSTEPP project:

1. Lack of administration's support for team meeting time
2. Team members' need for training on collaborative-consultative model and in teaching other members of

the team

3. Families seeing "more therapy" as better for their child.

Conclusion

In keeping with the beliefs supporting the Environmental Model proposed by Anne Jordan-Wilson, collaborative consultation works on the premise that when a student with communication disabilities is not participating in the day-to-day classroom activities, the activities should be reviewed and revised; the role of the consultants and the resources teacher(s) is to support the classroom teacher to discover what more can be done to enhance the student's participation and make the activities more meaningful for him or her.

There was much evidence among the participants of a strong desire to implement or strengthen the collaborative-consultative model in our own workplaces. This fall we hope to reconvene to take a look at the lasting impact of what we all found to be a stimulating and motivating two days. □

Editor's Note:

The INSTEPP project was established at New Hampshire as a three-year federal project aimed at providing training and technical assistance to school districts in the state regarding the integration of students with severe exceptionalities into regular classrooms. The acronym stands for Integrating Neighbourhood Schools: Training Educational Personnel and Parents. The project goals are:
To integrate students with severe exceptionalities into neighbourhood schools with typical peers;
To facilitate adoption of functional, community-based curriculum in participating districts;
To change delivery of related services from isolated and direct to integrated and consultative; and
To involve parents as partners in the educational process.

For more information contact the project Co-directors, Cheryl Jorgensen and Jan Nisbet, or Stephen Calculator at University of New Hampshire, Durham, NH, 03824.



Communicating in Ontario



A NEWSLETTER FOR EDUCATORS ABOUT AUGMENTATIVE COMMUNICATION

Sept. 1990



**EASTER SEAL
COMMUNICATION
INSTITUTE**

BULLETIN BOARD

Understanding the Student With Physical Disabilities:

A Program for Teacher Assistants

September 24-26, 1990

Hugh MacMillan
Rehabilitation Centre and
Hugh MacMillan Centre
School

Fee: \$150.00

Contact: Barb Smith
Educational Services
Department

The Hugh MacMillan
Rehabilitation Centre
350 Rumsey Road
Toronto, Ontario M4G 1R8
Telephone: (416) 424-3851

Read with ease!

Several libraries in North York have become places where having a physical disability does not bar people from participating in various programs offered in the library settings. When the new Central Library was built in 1987, accessibility was a major concern. The planners were rewarded for their labours when they won a Premier's award for accessibility. Staff at the many branches have received training in the use of special equipment designed to assist the physically disabled consumer. They also have participated in workshops to help them be sensitive to the needs of disabled people. The Central Library houses several communication boards for use by nonspeaking people. Some of these boards use graphic representations of library vocabulary. A combination of several commercially available graphic symbols were used such as Picture Communication Symbols, Oakland Picture Dictionary and Pictogram Idiogram Communication symbols as well as tailor made symbols by graphic artist, Johnathan

Cresswell-Jones. Other boards have library vocabulary represented by Blissymbols.

If you are interested in obtaining information about Blissymbol vocabulary for communication boards for your library contact Katherine Seybold at: Blissymbolics Communication International
250 Ferrand Drive, Suite 200,
Don Mills, Ontario, M3C 2P2
(416) 421-8377.

Third OISE Conference Exemplary Practice in Special Education

December 5-7, 1990.

For more information contact:
OISE Conference Office
Ontario Institute for Studies
in Education
252 Bloor Street West
Toronto, Ontario
Telephone: (416) 926-4711

Provincial Symposium on Autism

Metro Toronto Convention
Centre, Toronto, Ontario
Nov. 8 & 9th, 1990.
Fee: \$125.00 (early
registration)
for more information call
(416) 968-7877

Understanding the Student

With Physical Disabilities: A Program for Teachers

October 22-26, 1990

Hugh MacMillan
Rehabilitation Centre and
Hugh MacMillan Centre
School

Fee: \$275.00

Contact: Barb Smith
Educational Services
Department

The Hugh MacMillan
Rehabilitation Centre
350 Rumsey Road
Toronto, Ontario M4G 1R8
Telephone: (416) 424-3851

Introducing Blissbook !

Blissbook is a reading program designed to introduce Blissymbol users to reading print (traditional orthography) using the ICON, a Ministry of Education approved computer. Intended to be one part of a total reading program, it is an alternative approach which uses the student's proficiency with Blissymbols as a natural starting point for learning print.

Based on a language experience model, students first create their own reading materials using Blissymbolics, then, while reading through their compositions, exchange Blissymbols for their corresponding words. In this manner, students can progress from reading totally in Blissymbols, to reading a combination of symbols and words, to reading words alone. Priority is placed on giving students the opportunity to progress at their own pace. Blissbook is designed to work with the ICON (512k) with a 512k file server. Optional peripherals include DECtalk or Votrax speech synthesizer, printer, key guard, and ICON Interface Unit (for single switch access). Development of the program was funded by the Ontario Ministry of Education and it is available free of charge to school boards in Ontario. A manual is being developed and will be available for a minimal charge.

For more information please contact:
Blissymbolics Communication International
250 Ferrand Drive, Suite 200
Don Mills, Ontario
M3C 3P2
Telephone: (416) 421-8377

Black Box Allows Severely Disabled Students to Access Their Environment

Finding ways to help cognitively low functioning students access the computer can sometimes be a frustrating experience both for teacher and student alike. Many of these students are not able to use a standard keyboard due to physical or cognitive disabilities. Dr. Terry Semple, Senior Psychologist for the Metropolitan Toronto School Board, has been involved in the use and development of what he has called "The Black Box", to help these students interact with their environment and computers. Several schools in the Metropolitan Toronto area are using the Black Box in their classrooms. The Black Box is designed so that it can be used with eight different inputs. This means that a student could either have the ability to use eight keys on the keyboard or, through several switches, have access to several pieces of technology such as a tape recorder, television, light etc. The Black Box can also be used as a Biofeedback device to encourage the students to

engage in proper seating by placing input switches behind the student's head, back etc. When the student is sitting properly he or she can control the operation of a favorite piece of equipment or toy. Another use for the Black Box is as a monitoring device to record a student's progress. Instead of a teacher needing to stand behind a student to compile data, the Black Box can be connected to a computer and record the signals that it receives. The Black Box is available through distributors of devices for handicapped people under the trade name of The Analyzer from Labsoft Inc. Anyone wishing further information regarding the use of the Black Box can contact Dr. Semple at (416) 977-6537.

LOOK IN THE BOOK !

Games, Giggles, and Giant Steps, Susan Miller (Ed.), Instructor Books, 7500 Old Oak Blvd., Cleveland, Ohio. This book is written for parents, teachers, and caregivers of children ages 2- 8. Games, Giggles and Giant Steps is a collection of 250 games for children that require no equipment. Adaptions are given for physically disabled, visually and auditory impaired children, and also for children who are bilingual. Skills that are addressed include language, listening, visualizing, gross motor and singing. Activities are designed for use during circle, gym, music, and transition times.

Encountering Death from a Disabled Perspective

SUSAN ODELL

In the last issue of Communicating Together June, 1990, John Dowling wrote about his first encounter with death. He invited others to respond with their own experiences. Susan Odell of Toronto wrote the following account of three situations in which she has had to cope with the loss of close family members.

I am writing in response to John Dowling's article entitled "My First Encounter with Death", which appeared in the June, 1990 issue of *Communicating Together*.

I have had three encounters with death, two of them very recent. The first was in 1978 when my husband died.

Art and I were both born with cerebral palsy; I am totally non-speaking, and use a Blissboard to communicate. We were living in an institution when Art became sick one evening and was taken to the hospital in an ambulance. I wanted to go to the hospital with my husband, but the staff at the institution would not permit me. About two hours later, one of the nurses on duty received a phone call. From what I overheard, I knew it was the hospital calling, and that Art had died. On my communication board, I asked the nurse if she had heard anything yet about my husband. She said it was time for me to go to bed, gave me some sleeping pills, and put me to bed. I was frustrated and angry, but there was nothing I could do. I had no control over my life at that time.

The next morning when I woke, I heard the nurses during shift change discussing Art's death. Three times during the morning, I asked the nurses if they had heard anything yet about Art. They replied that they knew nothing. I was very upset. Imagine knowing that your husband had died, and yet no one would even tell you!

Later that morning, our doctor

came and told me what I had known all along; my husband had died the night before. My pain and grief were overwhelming. I could not stop crying.

I asked a nurse to notify my grandmother, and was surprised when she arrived at the institution shortly after. I asked her how she got there so quickly.

Her reply shocked me beyond belief! Art was *my husband*, and yet my grandmother and Art's best friend had been notified shortly after he died, while I had been told nothing until the next day.

I was not even permitted to arrange my own husband's funeral. It was all done as if I did not exist.

I wanted to cry out, to scream because my husband was gone, to lash out at the nurses for the insensitive way I was being treated. But I was too disabled to throw things, and no one was going to stand around long enough to be told off by a Blissboard.

The tears I shed were not just tears of grief for the loss of my husband. They were also tears of frustration; tears of anger; tears of helplessness; tears of despair.

That was the most painful experience I have ever lived through in my life. I felt so lost, and so terribly lonely. I battled through my feelings of grief and depression, and finally built a new life for myself, but even now, living independently in my own apartment for the past nine years, and working at a job I enjoy, I still miss Art very, very much.

Losing My Mother

In November, 1989, my mother died. She had cancer for some time, and her death was expected, but death is still very hard to accept, even when one knows beforehand that it is inevitable.

My family did not want me to come to the viewing or to the funeral. They were embarrassed because I am disabled. But I was my mother's first-born, and felt that it was my right to be there.

The funeral parlour was not wheelchair accessible. I had to ride

in the elevator that is used to transport dead bodies! I was upset and angry.

At the funeral parlour, people kept telling me to stop crying. I wanted to ask "Why? Why can't I cry? My mother has died. Everyone else is crying." But it is difficult to communicate with a symbol board when no one will take the time to listen.

My mother's death brought my dad and me much closer together. I understood what he was going through, and he turned to me for comfort. It was good to feel needed.

My friends at work were very supportive, and many came to the funeral. I was able to share my grief with them, even though I was angry at my family's rejection.

My Third Loss

When my grandfather died about four months later, I was surprised and hurt when my family stated I was not to come to the funeral. I could go to the funeral parlour for two or three hours one afternoon, that was all.

I have no words sufficient to thank Jacques Perron with his Freedom Machine Van, for helping me. It is appropriately named, for without it I would never have had the freedom to go to the funeral parlours. And Jacques remained with me during the time I stayed at the funeral parlour, and assisted me in many ways.

As well as the pain of grief and mourning, a disabled person also has many other problems to struggle with: rejection, lack of mobility, lack of accessible facilities, often lack of control over one's own life, and sometimes even lack of dignity. If a person is nonspeaking like myself, there is the limitation of not always being able to communicate feelings of grief, frustration, or anger. It is a time to face the realities of barriers that can often be avoided at other times.

Encountering death is not easy for anyone; but for a person who is disabled and nonspeaking, it can be a horrendously devastating experience. □

From the Editor

As most Canadians already know, 1991 will see the introduction of the Goods and Service Tax (GST). Unfortunately, this tax will have to be applied to subscriptions to *Communicating Together*. We kept this in mind when setting the new subscription prices for 1991 and have left the Canadian subscription rate the same as 1990.

We have, however, had to increase the rate for subscriptions outside Canada. This is necessary because of higher mailing costs. The good news for non-Canadians is that no GST is charged for subscriptions going outside of Canada.

The 1991 subscription rates for *Communicating Together* are as follows:

Canada (Canadian Funds)
\$22.00 + \$1.54 GST = \$23.54
ISAAC Members
\$17.00 + \$1.19 GST = \$18.19

United States (US Funds)
\$20.00
ISAAC Members
\$15.00

Outside North America
\$28.00 (Cdn Funds)
ISAAC Members
\$24.00 (Cdn Funds)

Research Projects Require Subjects

Melanie Fried-Oken, Clinical Coordinator/Researcher at the Rehabilitation Institute of Oregon, is conducting two studies relating to vocabulary selection for communication aids of nonspeaking preliterate children. She has written asking if we would help in locating subjects for her studies. Outlined here are descriptions of the subjects required for each study and how you can become involved.

Augmentative Communication and Vocabulary Selection for Twin Pairs

I am looking for sets of twins who live in the same environment, where one child is nonspeaking and the other twin is developing language within normal limits. There is no restriction of age, etiology of the nonspeaking condition, or twin type. For this study, nonspeaking is defined as an inability to use speech as the primary mode of communication. I am asking caregivers or educators and children who fit this description to take part in a research project.

Participation will take about two hours by parents, and there are no costs. Caregivers/educators are asked to complete two vocabulary forms: to list 110 words that the nonspeaking child would use if

he/she could speak; and to list the 110 words that the speaking child frequently uses during the day. Also, the parents are asked to audio-tape the speaking child talking for about 45 minutes during a play activity.

Using the Vocabulary of Nonambulatory, Speaking Children for Communication Aids

I have been funded by the March of Dimes Birth Defects Foundation to examine vocabulary use by preliterate children who use oral speech and are nonambulatory. The children must be between 3;0 and 6;0 years old and demonstrate expressive and receptive language skills within the normal range. It is hypothesized that the expressive language development of these children will be affected by the non-ambulatory condition, a factor that must be considered when we choose vocabulary for nonspeaking, nonambulatory children with cerebral palsy. Nonambulatory is defined as an inability to use ambulation (walking) as the primary mode of mobility.

Participation is similar to the study described above. About two hours of time are needed by parents, and there are no costs. Caregivers or parents of the children are asked to list a 110-word vocabulary form with words that the children frequently speak during a day. Also, the parents are asked to audio-tape the speaking child talking for about 45 minutes during a play activity.

For more information or to apply for the study, Parents, caregivers/educators who are interested in participating, or professionals who know of people who might be willing to be subjects can contact me at the following address:

Dr. Melanie Fried-Oken, Rehabilitation Institute of Oregon, 1040 N.W. 22nd Avenue, N500, Portland, Oregon 97210.
Telephone: (503) 229-7266
(Call collect)

COMMUNICATION OUTLOOK

Communication Outlook is an international quarterly offering a multi-disciplinary source of information on the latest products, and research & development in augmentative and alternative communication.

*To receive a sample issue, overview and subscription form, fill out this form and send it to: **Communication Outlook, Artificial Language Laboratory, 405 Computer Center, Michigan State University, East Lansing, MI 48824-1042.***

please send a sample issue and subscription form to:

NAME	ADDRESS	
CITY	STATE	ZIP/POSTAL CODE
COUNTRY		

SCHEDULE OF EVENTS

ESCI Special Interest Seminars

In Toronto, Ontario

The Easter Seal Communication Institute (ESCI) holds a series of seminars throughout the year on a variety of topics related to the application of augmentative communication.

Scheduled Workshops for Fall, 1990 include:

- Sign Language for Classroom Use. Six week evening course beginning September 10, 1990.
- Orientation to Boardmaking Technology. Two hour evening session, September 11 or November 13, 1990.

- Communication Assessment: A Different Perspective. Part one of a two part seminar; September 20, 1990.

- Practice: Practical Communication Programming for the Developmentally Disabled. Part two of a two part seminar November 22, 1990. Both of these sessions to be presented by Sue Troncho, MEd., SLP, Hamilton Board of Education.

- Bliss in a Day. October 11, 1990.
- Blissymbol Elementary Workshop. October 24-26, 1990.
- Programming for an Augmentative Communicator in the Pre-school. Two part seminar November 15, 1990 and February 7, 1991.

For fees and further information contact:

Training Coordinator,
Easter Seal Communication Institute,
250 Ferrand Drive, Suite 200,
Don Mills, Ontario M3C 3P2
Telephone: (416) 421-8377 ext. 2205

Blissymbolics Elementary Workshop

In Milan, Italy

- November 14-15 and 21-23, 1990
Contact: Aurelia Rivarola - GISCAA
Via Gozzano, 4, Milano 20131, Italy

Positioning Individuals with Cerebral Palsy for Communication

In Toronto, Ontario

- November 19, 1990
Presented by Irene McEwen, Department of Physical Therapy, University of Oklahoma. For information contact: Barb Smith, Educational Services Department, Hugh MacMillan Rehabilitation Centre, 350 Rumsey Road, Toronto, Ontario, Canada M4G 1R8
Telephone: (416) 424-3851

Facilitator Training Augmentative Communication Service Hugh MacMillan Rehabilitation Centre

In Toronto, Ontario

During the school year 1990-91, the Augmentative Communication Service (ACS) at HMRC will offer a variety of programs for clients, family members, teachers and therapists.

Topics include:

- General Communication/ Interaction Workshop
- Making Communication Displays
- Using Communication Displays
- Dealing with Unclear Speech
- Computer Training on a variety of topics relating to use with AAC
- Voice Output Communication Aids (VOCAs): An Introduction

For further information and registration contact: ACS, Hugh MacMillan Rehabilitation Centre, 350 Rumsey Road, Toronto, Ontario Canada M4G 1R8
Telephone: (416) 424-3805

11th Annual Southeast Augmentative Communication Conference

In Birmingham, Alabama

- October 5 - 6, 1990
Contact: Pam Elder, SACC-XI, United Cerebral Palsy of Greater Birmingham, 2430 11th Avenue North, Birmingham, AL 35234 U.S.A.
Telephone: (205) 251-0165

Fifth Annual Minspeak Conference

In Seattle, Washington

- November 14-15, 1990
Contact: Prentke Romich Co., 1022 Heyl Road, Wooster, Ohio 44691 U.S.A.
Telephone: 1-800-642-8255 or (216) 262-1984

1990 Annual Convention ASHA

In Seattle, Washington

- November 16-19, 1990
Contact: American Speech-Language Hearing Association, 1081 Rockville Pike, Rockville, MD 20852
Telephone: (301) 897-5700

About the Publisher

The Easter Seal Communication Institute (ESCI), formerly the Blissymbolics Communication Institute, has worked since its inception toward enhancing the lives of nonspeaking people. Now operating as a department of The Easter Seal Society, Ontario, ESCI focuses on supporting augmentative communicators and their families and the professionals who work with them through its strategic goals.

1) Using a collaborative consultative model, to develop and implement services to improve the quality of education for nonspeaking children and young adults.

2) To educate, inform and increase the awareness of the community about the needs and abilities of nonspeaking children and young adults.

3) To contribute to and participate in the growing field of augmentative and alternative communication.

4) While supporting a number of communication systems, to recognize the system of Blissymbolics as a valuable means to advance augmentative and alternative communication.



ALWAYS AVAILABLE

Prentke Romich Company has always made service a priority! Since the beginning, we've made it our business to focus on the needs and wants of the AAC community. Because we've listened, we offer:

PRC Service...24 Hours a Day

Equipment problems do not always occur during normal business hours and PRC understands the importance of your receiving immediate help and advice. Our 24 hour, seven days a week, toll-free telephone service means that we are always available — to troubleshoot a potential problem, help with operational procedures, or provide and arrange for equipment repair/rental assistance. Whenever you need us, simply call 1-800-262-1990 or (216) 262-8031.

PRC's Network of Support

- ◀ Minspeak™ Application Programs (customized vocabularies for defined populations)
- ◀ Toll-free inquiries
- ◀ Free service loaner equipment
- ◀ Three and five day in-house product training schools
- ◀ One and two day off-site Minspeak Application Program training workshops
- ◀ Annual Minspeak Conference (proceedings available)
- ◀ Minspeak institutes and camps
- ◀ *Current Expressions* newsletter
- ◀ Service contracts
- ◀ Funding assistance

Prentke Romich Company's level of service and support continues to be the highest in the industry. By offering unsurpassed products, programs, and services, we are able to make a difference.

Prentke Romich Company...for higher personal achievement.



Prentke Romich Company

1022 Heyl Road • Wooster, Ohio 44691
(216) 262-1984 • 1-800-262-1984 • FAX (216) 263-4829
24-hour Service 1-800-262-1990 and (216) 262-8031

CANADA: Betacom Systems for Disabled People • 723 Halpern • Dorval, Quebec Canada H9T 1G5 • (514) 636-9267
UNITED KINGDOM: Liberator, Ltd. • Whitegates • Swinstead, Lincolnshire NG33 4PA • United Kingdom
In UK: Corby Glen (04 76 84) 391

WP52B